

Application: 10/070,302
 Filed: May 1, 2002
 TC Art Unit: 1641
 Confirmation No.: 2837

Rev 05/03

WEINGARTEN, SCHURGEN, GAGNEBIN & LEOVICI LLP

Ten Post Office Square
 Boston, Massachusetts 02109
 Telephone: (617) 542-2290
 Telecopier: (617) 451-0313

Via Facsimile No.

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Date: March 3, 2004

Attorney

Docket No.: MBP-010XX

Sir:

In re application of: DANIEL R. DIETRICH ET AL.

Entitled: COGENER INDEPENDENT DETECTION OF
 MICROSYSTIN AND NODULARIN CONGENERES

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- ☐ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$) per §1.17(e).
☐ Enter the unentered amendment previously filed on per §1.116.
☒ A Petition for Extension of Time for 3 months is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$475.00) per §1.17.
☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
☐ is hereby appointed Associate Attorney by:

Registration No.:

Attorney of Record:

Registration No.:

☒ Other: Replacement Sheet (Fig. 3)

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	1 - 3	= 0	x \$84.00 =	0
Total	26 - 28	= 0	x \$18.00 =	0
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$280.00 =	0
<input type="checkbox"/> Additional fee for each claim in excess of 3				0
Small Entity filing, divide by 2. Small Entity status must be asserted.				0
<input type="checkbox"/> Additional fee for each claim in excess of 3				0

- ☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$) for the cost of same.

☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

☒ The Commissioner is hereby authorized to charge payment of \$475.00 to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Mary E. Ceperley, TC Art Unit 1641, Fax No. (703) 872 9306, on 3-3-04.

SUBMIT IN TRIPLICATE

Attorney of Record: Charles L. Gagnebin III

PAGE 2/24 * RCVD AT 3/3/2004 3:49:50 PM [Eastern Standard Time] * SVR:USPTO-EFXXF-1/5 * DNS:8729306 * CSID:16176950892 * DURATION (mm-ss):04:54

04/05/2004 DMARTINO 00000010 230804 10070302

01 FC:1253 475.00 DA

fee only